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	Skagit County Auditor				
	5/	25/2005 P		1 of	1 8:39/
WHEN RECORDED RETURN TO					
Name State Bank of Concrete					
Address P.O. Box 426					
City, State, ZiConcrete Wa 98237					
Land Title Company					
FILED FOR RECORD AT REQUEST-OF					
LAND TITLE COMPANY					
	conveyance	M-15	218	•	
The undersigned as trustee under that certain	Deed of Trust dated.	11-1	0-2003		,
in which MARY L KOLLMAN		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			.is grantor
and STATE BANK OF CONCRETE					in
beneficiary, recorded on 11-14-2003, and of Skagit County, Washing of Trust a written request to reconvey, reciting the fully satisfied, does hereby reconvey, without warratitle and interest now held by said trustee in and to Skagit County, Washing Lot 5 Block 1, "CENTRAL BAK as per plat recorded in Volcords of SKagit County, Washing County and County was said trustee in and to Skagit County, Washing County as per plat recorded in Volcords of SKagit County, Washing County was said trustee in and to said trustee in and	ton, having received at the obligations searty, to the person of the property description, as follows: CER, SKAGIT COUNTY OF THE SHIP OF PLATES SHIP OF PLATES SHIP OF PLATES SHIP OF PLATES SHIP OF THE SHIP OF	I from the cured by the n(s) entitle in said	beneficiane Deed ed there d Deed of De	ry under of Trust leto all of of Trust, s	said Deed have been the right, ituated in
	By Pa		steë) Le		
STATE OF WASHINGTON SS. SS.	STATE OF WASHIN	GTON Skagit	}		
On this day personally appeared before me	On this24th before me, the undersign duly commissioned and	ed, a Notary Pu sworn, persona	blic in and fo ally appeare	d.,	glis,
to me known to be the individual described in and who executed the within and foregoing instrument, and acknowledged that signed the same as free and voluntary act and deed,	the authorized signatory corporation that execute instrument to be the free uses and purposes there authorized to execute the	of ANDT. and the foregoing and voluntary a in mentioned,	TLE CO g instrument ct and deed of and on oat	MPANY t, and acknow of said corpor	the wledged said ration, for the
for the uses and purposes therein mentioned.	Witness my hand and of			e day and ve	ar first above
GIVEN under my hand and official SHARIN R.	ANTHONY	Marine Source		()	

STATE OF WASHINGTON

NOTARY ---- PUBLIC Washington, My Commission Expires 9-6-2005

.....day of

Notary Public in and for the State of residing at

My appointment expires:

SHARON R ANTHONY Notary Public in and for the State of Washington, residing at....MOUNT...VERNON My appointment expires: ...9-6-2005

Form No. LT-16 Full (1/01)